



STATE OF CONNECTICUT

Know all Men by these Presents:

That we, _____

as partners doing business under the partnership name of _____,
with its principal place of business at _____

(Street and Number)

(City)

(State)

(Zip Code)

desiring to conduct the business of **Insurance Premium Finance Company** in the State of Connecticut in conformity with the laws thereof, and in consideration of the privilege granted us to carry on and transact such business in the State of Connecticut, do hereby make, constitute and appoint the Insurance Commissioner of said State, or his successor in office, our true and lawful attorney in and for the State of Connecticut, on whom all-process of law, whether mesne or final, against us the said _____

_____ and _____

_____ or any of us as partners, or against

(Trade Name of Partnership)

May be served in any action or proceeding against said partnership, or any said partner or group of said partners in the State of Connecticut, subject to and in accordance with all the provisions of the laws of the State of Connecticut now in force and such other laws as may hereafter be enacted in relation thereto. And we, the partners of said partnership, do authorize and empower the said attorney, as agent of said partnership and or each said partner, to receive and accept service of process in all cases as provided by the laws of the State of Connecticut, and such service shall be deemed personal service on said partnership and on each said partner, and shall be of the same legal force and validity as if served on said partnership and on each said partner; and said partnership and each said partner hereby waives all claims by error by reason of such service. This appointment shall continue in force so long as the said partnership or any of said partners remain licensed as an **Insurance Premium Finance Company** and until the Statute of Limitations has run against any and all claims that may exist against it or them because of their having done business under said license.

In Witness Whereof, we, as individuals, jointly and severally and as all of the partners of

_____ Have hereunto set our hands and seals this

(Trade name of partnership)

_____ day of _____ A. D. 20____.

_____ L.S.

_____ L.S.

_____ L.S.

_____ L.S.

_____ L.S.

_____ L.S.

State of

SS._____

County of _____ **(City or Town)** _____ **(Date)** _____

I, _____, a Notary Public in and for the State of _____ do
hereby certify that on the _____ day of _____ 2_____, personally appeared before me _____

to me known to be the individuals described in and who executed the foregoing instrument, each of whom
acknowledged that he/she signed and sealed the same as his/her free and voluntary act and deed for the uses and
purposes therein mentioned.

(Notary Public)